## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number

10091201

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |              |                               |              |                  |         | SMALL ENTITY TYPE OR |                        |        | OTHER THAN<br>SMALL ENTITY |                        |
|---|--|---|--------------|-------------------------------|--------------|------------------|---------|----------------------|------------------------|--------|----------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 24           |                               |              |                  |         | RATE                 | · FEE                  | 1      | RATE                       | FEE                    |
| FOR   |  |   | NUMBER FILED |                               | NUMBI        | ER EXTRA         |         | BASIC FEE            | 370.00                 | OR     | BASIC FEE                  | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 24 minus 20= |                               | • 4          | )                |         | X\$ 9=               | 36                     | OR     | X\$18=                     | 72                     |
| IND   | EPENDENT CL                                    | AIMS                                      | 4 minus 3 =  |                               | * )          |                  |         | X42=                 | 42                     | OR     | X84=                       | 84)                    |
| MU  | LTIPLE DEPEN                                   | IDENT CLAIM PI                            | RESENT       |                               |              |                  |         | +140=                | 112                    | OR     | +280=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |              |                               |              |                  | L       | TOTAL                | 498                    | OR     | TOTAL                      | )                      |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |  |   |              |                               |              |                  |         | SMALL I              | ENTITY                 | OR     | OTHER<br>SMALL I           |                        |
|   |  | CLAIMS                                    |              | HIGH                          | EST          | (Column 3)       | 1 г     | O.IIALE !            | ADDI-                  |        | ONIACE                     | ADDI-                  |
| A'MENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT           |              | PREVIO<br>PAID                | DUSLY        | PRESENT<br>EXTRA |         | RATE                 | TIONAL                 |        | RATE                       | TIONAL                 |
|   | Total  | * 69                                      | Minus        | ** 2                          | 4            | -45              |         | X\$ 9=               | 405                    | OR     | X\$18=                     |                        |
|   | Independent                                    | * 4                                       | Minus        | *** (                         | CLAIM        | -                |         | X42=                 |                        | OR     | X84=                       | <u>ئ</u>               |
| <b></b>   |  |   |              | LIIOLII                       | CBann        |                  | '       | +140=                |                        | OR     | +280=                      |                        |
|   |  |   |              |                               |              |                  |         | TOTAL<br>ODIT. FEE   | 405                    | OR     | TOTAL<br>ADDIT, FEE        |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |              |                               |              |                  |         |                      |                        |        |                            |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |         | RATE                 | ADDI-<br>TIONAL<br>FEE | 0      | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus        | **                            |              | =                |         | X\$ 9=               |                        | OR     | X\$18=                     |                        |
|   | Independent                                    | *   | Minus        | ***                           |              | =                | ]       | X42=                 |                        | OR     | X84=                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |              |                  |         |                      |                        |        |                            |                        |
| *   |  |   |              |                               |              |                  | L       | +140=                |                        | OR     | +280=                      |                        |
|   |  |   |              |                               |              |                  | A       | TOTAL<br>DDIT. FEE   |                        | OR     | TOTAL<br>ADDIT. FEE        |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |              |                               |              |                  |         |                      |                        |        |                            |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |         | RATE                 | ADDI-<br>TIONAL<br>FEE |        | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus        | **                            |              | =                | П       | X\$ 9=               |                        | OR     | X\$18=                     |                        |
|   | Independent                                    | *   | Minus        | ***                           |              | <b>E</b> -       | lt      | X42=                 |                        | OR     | X84=                       |                        |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |              |                  |         |                      |                        |        |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |              |                               |              |                  |         |                      |                        | OR     | +280=                      |                        |
| **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |              |                               |              |                  |         |                      |                        | OR ,   | TOTAL<br>ADDIT. FEE        |                        |
|   |  | nber Previously Pai                       |              |                               |              |                  | er four | nd in the app        | ropriate box           | in col | umn 1.                     |                        |